

Meeting Minutes COVID-19 Mitigation and Mangement Task Force

Attendance	DATE	November	November 19, 2020	
	TIME	10:00 A.M.	10:00 A.M.	
	METHOD	Video-Tele	Video-Teleconference	
	RECORDER	Tanya Ben	Tanya Benitez/Meagan Werth Ranson	
	Task Force Voting M			
Member Name			Present	
Caleb Cage			Х	
Richard Whitley			X	
Terry Reynolds			X	
Jaime Black			X	
David Fogerson			X	
Felicia Gonzales			X	
Brett Compston			X	
Meagan Werth Ranson			X	
Chris Lake			X	
Dagny Stapleton			X	
Wesley Harper			X	
Mark Pandori			X	
	Task Force Non-Voting	Member Attendar	nce	
Kyra Morgan			X	
Lisa Sherych			X	
Julia Peek			X	
Melissa Peek-Bullock			X	
Malinda Southard			X	
Lesley Mohlenkamp			X	
Samantha Ladich			X	

1. Call to Order and Roll Call

Chair Caleb Cage, Governor's Office (GO), called the meeting to order. Roll call was performed by Meagan Werth Ranson, GO. Quorum was established for the meeting.

2. Public Comment

Chair Cage opened the discussion for public comment in all venues. Written public comment is attached. No verbal public comment was provided.

3. Approval of Minutes

Chair Cage called for a motion to amend or approve the draft minutes from the November 12, 2020 Task Force meeting. A motion to approve the drafts minutes as presented was provided by David Fogerson, Division of Emergency Management (DEM), and a second was provided by Terry Reynolds, Business and Industry (B&I). Motion passed unanimously.

4. Update on COVID-19 Response within the Nevada System of Higher Education (NSHE)

Chancellor Dr. Melody Rose, NSHE, noted the health and well-being of Nevada's public higher education community, which includes students, staff, faculty, administrators, and surrounding communities continues to be of utmost priority in the midst of this dynamic and protracted pandemic. Communication and coordination of resources, transparency, and reliance on the best health and science information available is central to the COVID response efforts. Dr. Rose has been very impressed with compliance on the campuses with everything from masking to social distancing and limiting gatherings. Dr. Rose noted she had the opportunity to review the campus COVID-19 plans that had been constructed and the plans were thoughtfully devised and based upon data and healthcare expertise to guide each campus decision-making process. As we know our campuses have all kinds of situations. They are very different from one another. Each institution is equipped to address the challenges based on their local needs. NSHE institutions are therefore emphasizing flexibility and the willingness to pivot at a moment's notice to ensure that they are aligned with health and science-based best practices. NSHE understands and shares the concerns of our student, staff, and faculty regarding this pandemic. That is why (NSHE started a COVID-19 Task Force of its own that allows all of the institutions to share information, resources, and best practices. This Task Force was created in March 2020. It is chaired by NSHE Chief General Counsel, Joe Reynolds, and it is comprised of representatives nominated by the presidents of each NSHE institution. The Task Force meets frequently and acts aggressively to identify resources, communicate information, and to discuss response strategies as the pandemic continues to evolve. The Task Force is in addition to active COVID-19 work groups that are formed at each of the institutions. As NSHE institutions approach the end of the fall 2020 semester, work is being done to continue a hybrid approach for remote and in-person instruction. For example, a science class might be designed to include online lectures to avoid those large gatherings, but also provide small in-person laboratory sessions that follow established social distancing protocols. Additional safety measures include reducing the size of those labs, using masks, and increasing testing availability. NSHE institutions are 75% online currently. Employees throughout NSHE are continuing to work remotely wherever possible and where doing so will not compromise essential student and faculty support services. In October, as COVID-19 trends worsened NSHE's own policy for system administration and systems computing services were modified to allow employees even greater flexibility to choose to work from home. In response to Governor Sisolak's November 10, 2020 press conference and his stay at home request, Dr. Rose directed that NSHE system administration and system computing services offices in Las Vegas and in Reno, to physically close and asked all employees to work remotely for the two-week freeze period. NSHE will reevaluate the situation after there is additional guidance from the Governor later this month. Dr. Rose has worked with each institutional president and directed all NSHE institutions transition to as much remote instruction as possible from the Thanksgiving weekend through the end of fall semester in mid-December. NSHE institutions are currently in the midst of finalizing their plans for the spring 2021 instruction. Some institutions, as you may have seen, such as University of Nevada Reno (UNR) have eliminated the spring break entirely. Others are considering doing so. Despite some relaxation of in-person gathering limits per gubernatorial directives and county restrictions, NSHE is choosing to maintain a 50-person classroom limitation. Spring plans will continue with a very strong emphasis in hybrid instruction and will follow all gubernatorial, Occupational Safety and Health Administration (OSHA), Centers for Disease Control and Prevention (CDC) and County health guidance. NSHE is reporting weekly COVID-19 positive cases throughout its eight institutions and system administration. Dr. Rose noted one of her first actions as chancellor was to direct each NSHE institution to compile and provide data on the number of positive cases from students, staff, and faculty and post that information on the NSHE website on a weekly basis. Dr. Rose is provided an updated report at the beginning of every week and monitors that data with the presidents to spot clusters or trends. From March 2020 through November 2020, cumulative totals are as follows: University of Nevada Las Vegas (UNLV) - 321 student cases, 68 faculty cases; Nevada State College (NSC) - 39 students, 6 faculty; Desert Research Institute (DRI) - 1 faculty; College of Southern Nevada (CSN) – 151 students, 30 faculty. For a total in the Southern Nevada institutions of 511 students, 105 faculty. In the North, UNR – 871 students, 83 faculty; DRI North – 2 faculty; Truckee Meadows Community College (TMCC) - 73 students, 15 faculty; Great Basin College (GBC) - 12 students, 6 faculty; Western Nevada College (WNC) -34 students, 7 faculty; System Administration – 1 faculty. For a total in the Northern Nevada institutions – 990 students, 114 faculty. NSHE's trends in the south have been inconsistent week by week. NSHE's trends in the

north have been more consistently on the rise, especially in the past three weeks. UNR took additional aggressive steps in October 2020 to protect its students, staff, and faculty. Where there have been positive cases within the institutional communities, there is virtually no evidence of campus-based spread. The data is being released every Monday, and Dr. Rose has instructed institutions in system administration to make this data public as part of NSHEs full commitment to transparency and accountability. Having this information is paramount in making the best decisions, and Dr. Rose is proud that NSHE is a model in the country in this regard. We know that some concerns continue. One of Dr. Rose's top concerns is mental health. It is often overlooked as we understand more broadly in our society and consistently under resourced and it impacts all of our lives. During the COVID-19 pandemic, an unprecedented amount of uncertainty about the present and future combined with frequent isolation, disjointed methods of communication and instruction, heavier than usual workloads and basic fear about safety and well-being in addition to economic instability have contributed to increased levels of stress, anxiety and grief by all of our communities. On that basis, Dr. Rose has ordered the development of a COVID-19 Mental Health Task Force at NSHE to identify the mental health needs facing our community during the COVID-19 pandemic and the resources that currently exist within NSHE to address those needs as well as those available beyond local county, state, federal and nonprofit entities. NSHE will also ask the Mental Health Task Force to develop an actionable set of recommendations on how to communicate these resources to NSHE student, staff and faculty and how to get assistance and they may in addition make added recommendations about how to improve our services, awareness, and resources for mental health. Dr. Rose intends to formally announce the composition of this task force in the coming weeks, and will kick off the Task Force's work by conducting a virtual listening tour myself with students and faculty. Dr. Rose wanted to note how much NSHE is within the Task Force in helping resolve this pandemic. NSHE's eight institutions have stepped up to help their local communities and state during this unprecedented time, whether it is our students who are delivering food safely to the elderly, NSHE's institutions loaning or donating urgently needed medical supplies including ventilators and Personal Protective Equipment (PPE) to first responders in hospitals, or professors sharing their knowledge with the media and the world. In terms of athletics, the athletic departments at UNLV and UNR are in constant contact with the Mountain West Conference and are continually working with the Governor's office and health experts regarding COVID-19 and how it affects our student athletes and our fan bases. This has caused some difficult decisions to be made. UNLV football has canceled their upcoming with Colorado State University due to positive tests and the contact tracing results. Another issue of concern or interest about NSHE is on-campus housing. NSHE institutions continue to employ risk mitigation options for residential housing and dining which reflect appropriate health precautions. NSHE has greatly limited the number of students in residence halls and continues to provide housing to those who have housing insecurity when they are not on campus. Dr. Rose has directed the presidents that no NSHE institution is allowed to evict a student from a dorm or housing residence hall due to COVID-19 financial hardship. NSHE institutions are actively working with our students and providing resources though to those who are facing housing or food insecurity. On the subject of testing, NSHE continues to have robust conversations about the efficacy of across the board testing of students at NSHE institutions. Dr. Rose is keenly aware of universities and colleges in other states that have engaged various such testing methods for their students. Currently, the recommendation of the NSHE Task Force is that they are limited in both the availability of tests and the resulting turnaround times to make widespread testing truly effective. Thus, NSHE has not considered regular universal testing as a viable option at this time. Dr. Rose is interested in any available resources and communication with members of the Governor's Task Force on how we might revisit this issue going forward, particularly the BinaxNOW test. Dr. Rose would appreciate any further insight into that possibility. NSHE is going to be turning its attention to a vaccination plan with the hope of a viable vaccine on the horizon, NSHE is very interested in partnering with the state and all relevant agencies on delivering a vaccine to students, staff and faculty. The NSHE COVID-19 Task Force is beginning to have those conversations and we would welcome your insight and partnership as you are planning on this front unfolds. The year 2020 has been truly unbelievable. NSHE is ready to help our state economy recover from the pandemic and economic downturn. As during the great recession, many people will be looking to grow in terms of higher education, either to help them get ahead in their current role or to re-skill into a new career by completing short-term training certificates. In the meantime, NSHE and

the Board of Regents will continue to work collaboratively with the Governor's office and all local state and federal authorities to ensure that all students, staff, faculty and visitors at the eight NSHE institutions receive the best available information and practices regarding the coronavirus to ensure the health of the entire public education community.

Chair Cage noted NSHE has been an incredible partner from the beginning. Great Basin College set the standard in the state for contact tracing, development of workforce associated with contact tracing. That model was picked up by UNR and UNLV to assist with building that workforce for the state. NSC, CSN, and UNLV have been deeply involved in helping develop test kits. They have put together thousands of kits for our state to ramp up the test capability. Chair Cage noted Dr. Rose spoke about the mental health of students and faculty. NSHE has some of the best public and behavioral health minds at the state of your institutions. At the state, through the Department of Health and Human Services (DHHS) there are a number of experts who have been working with our K-12 system. We have some K-12 representation here as well who may be able to support or provide input or participate in your listening tour. The foresight you are speaking of now, the Task Force members know the economic impact is going to linger for longer than the pandemic. The state will have to transform the workforce in order to meet the needs of the post COVID economic landscape in Nevada. Putting Dr. Rose's effort into that to help Nevada to grow out of this challenge is critically important. Chancellor Dr. Rose noted regarding mental health, it was clear that students are suffering. Whether they had a change in pedagogy or not, the kind of unexpected cascade of events they have experienced this semester, is something we need to pay attention to and we need to listen and be responsive. When the state started down this road in March, there was some hope that this would be a short acute event and that NSHE could take swift action and go back to our business. We all now understand this is not a sprint, it's a marathon. There has to be a different strategy around wellness, burnout, listening, and pivoting. Dr. Rose notes she is pleased to work with the group of presidents at the NSHE institutions. There was a debate and an announcement that was made possible because the presidents retain authority over their grading policy. They wanted to come together and speak with a unified voice. This should be helpful to our students to hear that consistency and to see leadership from those presidents as they lock arms to support students. You will also be seeing some announcements from us around workforce. NSHE has a role to play, particularly in the short-term, certificates to get people job ready. NSHE will be working with the new data that will be produced here in the coming weeks around workforce supply so any changes to their certificates would be helpful to Nevadans.

Melinda Southard, DPBH, noted DPBH is willing to work with NSHE to get the BinaxNOW out to the institutions. Chair Cage clarified the grading decision was to move to a satisfactory or unsatisfactory grading basis for the next semester or semester and a half. r Dr. Rose noted the board made a policy change to provide the presidents greater flexibility to allow student use of satisfactory or unsatisfactory grading option as opposed to letter grades. Over the summer, the chief academic officers from the campuses believed that it was no longer necessary to retain that flexibility, because students knew the platform their classes would be in this fall. There has been a swell of concern coming from students and others about needing access to that option. The presidents made the decision that they would extend the option of satisfactory/unsatisfactory grading through the rest of this academic year. Chair Cage noted the balance between accommodation and the rigor that would be expected from academic institutions and balancing that during a crisis is extremely difficult. Dr. Mark Pandori, Nevada State Public Health Laboratory (NSPHL), thanked Dr. Rose and noted UNR is the home of the (NSPHL). In collaboration with UNR, NSPHL has been able to provide testing during this pandemic, but to contribute significantly from an intellectual perspective to the international knowledge on this virus. It has resulted in five peer-reviewed international publications that were collaborations between the University and the NSPHL. It is one of the things that is unique about the NSPHL that it has such a close relationship with its educational partner here and has been able to meaningfully impact the pandemic, not only through testing, but through these investigations and this sort of intellectual power that exists right next door. Dr. Rose thanked Dr. Pandori for the partnership and noted it is often an underappreciated response to the pandemic. There is a hope to learn from this in order to be able to protect our communities going forward.

5. Appointed Department Updates

a. Department of Business and Industry (B&I) - Enforcement - Director, Terry Reynolds

Terry Reynolds spoke to work being done by B&I and the Division of Industrial Relations (DIR), which oversees the state's Occupational Safety and Health Administration (OSHA) program. B&I has continued doing inspections. B&I has conducted over 10,000 inspections and have responded to over 5,000 complaints and referrals through OSHA. One concern is with the construction field. B&I is seeing some slippage in terms of compliance rates. B&I would like to ask the construction associations, contractors, and builders associations in those areas to promote within their membership the importance of mask wearing, social distancing, and encouraging participation throughout. The other area of concern is the big box stores. It is noted that big box stores are not really following the existing protocols for capacity. B&I is seeing a lot of heavy gatherings throughout the region. B&I are asking for the big box stores to monitor their capacity with more regularity. The local governments can assist with reminding these stores of the capacity limits and what is expected from them to be in compliance. B&I will be going out week and will be working with the different enforcement teams both in Washoe and Clark County. This effort will be to ensure compliance and use this time as an opportunity for education and messaging. B&I has been working with local health districts with monitoring and reviewing adult and youth sports plans. B&I is also being cognizant of other gatherings to ensure mitigation efforts are being enforced and implemented properly.

b. Division of Emergency Management (DEM) - PPE Status - Chief, David Fogerson

Chief David Fogerson provided an overview of the Personal Protective Equipment (PPE) status per the Disease Outbreak Management Plan. Chief Fogerson noted DEM has three big pushes: 1) coordinating resources to make sure that all local government and state government are working together,2) logistics and 3) grants. For coordination, DEM is doing daily conference calls with all seventeen jurisdictions and state partners. The conference calls have a focused effort on how mitigation efforts are working and identifying areas of improvement. On the logistics side, DEM has been helping to push out BinaxNOW kits that Dr. Southard spoke of earlier. DEM is working on stockpiling the PPE that is going to be needed for first responders, hospital staff, home health agencies, and skilled nursing facilities. Chief Fogerson noted, DEM has received, supplies from the Federal Emergency Management Agency (FEMA) that the local government's requested and are sending that out this week. This supply stockpile was received at no cost to the state. Chief Fogerson noted the school supply of PPE should be out within the next week. WDEM has a 120-day surge supply stockpile but gloves are at a nationwide shortage. Regarding grants, DEM is working on 90 different grant projects for different local governments and state government agencies, totaling approximately 131 million dollars.

Chair Cage requested additional information regarding the grants and the Public Assistance (PA) program and how those work. Chief Fogerson noted they are called public assistance grants, but the public part is for the public sector of the government, not for individuals. The PA grants are for local governments and state agencies that have had to purchase items or have issues that they need to resolve because of the incident. Right now, FEMA does reimburse 75% of it and 25% is a local match. The Governor has submitted a request to FEMA and the President to change that percentage to a 90/10 split. There would be less money out of the state and local government coffers and more money coming in from the federal government to assist with the purchases that have been made. This is a reimbursement grant, so local and state governments are out of this 131 million and this is working to try to get the money to come back in. Some of this goes back to February when the pandemic started. After December 31, 2020, the only process to get any money to sustain the programs will be through the PA reimbursement program through FEMA from our declared disaster. Chair Cage noted these reimbursements can take years.

c. Fiscal Update - COVID related Funding Coordination - Executive Budget Officer, Lesley Mohlenkamp

Lesley Mohlenkamp provided an overview of COVID related funding coordination efforts. The Governor's Finance Office (GFO) noted the Coronavirus Relief Fund (CRF) has the end of its performance period as December 3, 2020. The GFO has been working with the DEM to find solutions and funding opportunities for what is needed for the surge and maintaining as long as possible through the end of the year. The GFO has been working on other initiatives related to homeless assistance and childcare assistance. The GFO is also looking at turnkey connectivity options, which would help with remote learning. The GFO has a few other initiatives that are being looked at with economic assistance. Keep in mind that these all have to be very turnkey options because at this point, there is a very limited amount of time to use the funds. Chair Cage noted CRF must be expended by December 30, 2020. Terry Reynolds asked if the funding has to be utilized by December 3,2020 or if the funds can be contractually obligated and there is a contract signed to perform work that goes past December 30, if this was an allowable use of the funds. Ms. Mohlenkamp noted this is one of the largest challenges. The funding is very restrictive in that whatever is purchased, the goods or services, need to be executed before or by the 30, 2020. In certain situations, the purchase has to be put to use, for example connectivity. Not only does the equipment have to be purchased, it has to be installed and it has to also be in use. There are some situations where something may carry over past the December 3, 2020 date. It usually has to do with purchasing something in bulk. Mr. Reynolds noted the issue lies with housing in context of rental assistance. There are approved programs for that, but there is concern if someone was approved and they had not received the assistance yet, whether that could continue past the December 30, 2020 date to get the money out, even though it was authorized prior. Ms. Mohlenkamp noted grants do have a different type of function in that once the funds have gone to the recipient, you have technically executed what it was intended to do. Ms. Mohlenkamp noted she would be happy to work with Mr. Reynolds offline to address this issue further.

d. Nevada Department of Education (DOE) – School Opening Plans – Deputy Superintendent of Educator Effectiveness and Family Engagement, Felicia Gonzales

Felicia Gonzales provided an update on the Department of Education and the Statewide School Reopening's. Ms. Gonzales noted in September DOE partnered with the Teacher's Health Trust to provide a COVID-19 testing program for all public-school educators and staff in the state funded by Coronavirus Relief Fund (CRF) dollars. Currently, nine school districts and the charter school authority, as part of their mitigation efforts, are participating in the COVID-19 testing program. This program also includes monitoring and retesting of educators and staff and concludes on December 30, 2020.

e. Gaming Control Board (GCB) - Chief, Jaime Black

Jaime Black provided an update on the GCB enforcement efforts. Ms. Black noted the new Chair of the Gaming Control Board has been appointed. Brin Gibson has replaced Sandra Douglas Morgan as the Chair and is getting up to speed with operations.

f. Nevada Association of Counties (NACO) – Executive Director, Dagny Stapleton

No update to provide.

g. Nevada League of Cities – Director, Wesley Harper

Director Wesley Harper, Nevada League of Cities noted the league has started to contact each city to emphasize business inspections and compliance rates. The Nevada League of Cities knows that cities are working through the counties in order to cooperate with regional plans. Mr. Harper noted work has been done in reaching out to our members directly to emphasize inspections and get an understanding of their compliance rates within

their municipalities. Mr. Harper noted the COVID Trace app is being promoted and the Nevada League of Cities is encouraging municipalities to encourage all employees, businesses, and customers download the app.

h. Nevada Hospital Association9 (NHA) – Executive Director, Community Resilience, Chris Lake

Dr. Chris Lake provided an overview from the NHA. Dr. Lake noted the hospitals are seeing increased demand. Primarily in the metropolitan service areas in the North and South. Some of the hospitals are seeing staffing challenges. These are related to staff members and staff family members being exposed to COVID or testing positive for COVID through community spread and then needing to quarantine or self-isolate. Hospitals are working with traveler organizations to get travelling nurses. Traveling nurses are becoming harder to locate now and are much more expensive due to the demand in these services across the United States. New therapies are Available and being used within hospitals. An antibody therapy was released last week and is being administered now in hospitals throughout Nevada. The NHA is working on the vaccine distribution plan with the State and encouraging patients who have recovered from COVID disease to consider doing a plasma donation to help with the fabrication of the antibody therapy.

6. Current Situation Report

Kyra Morgan DHHS, provided an overview of the current situation in Nevada as it relates to COVID to include the following (slides were also included in the meeting packet):

- Cases
 - 1,228 14-day rolling average cases daily
 - o 1,004cases per 100,000 over the last 30 days
 - o 125,459 cumulative cases
 - o 3,849 cumulative cases per 100,000
- Deaths
 - 6 14-day rolling average deaths daily
 - o 6 deaths per 100,000 over the last 30 days
 - 1,947 cumulative deaths
 - o 62 cumulative deaths per 100,000
- Testing
 - o 324 tests/day per 100,000 over the last 14 days
 - 15.6% test positivity rate over the last 14 days
 - o 1,454,741 cumulative tests

Ms. Morgan provided the group with an update regarding the slides provided in the handouts showing the trends of COVID-19 in Nevada. Nevada is now experiencing increases in cases, hospitalizations, and deaths. Daily new cases are now regularly higher than previous peak dates in July and August. Regionally, Nevada is outpacing Arizona and California in cases per 100,000. Nevada's data is outpacing modeling forecasts for general hospitalizations, but not for critical care hospitalizations. The current 14-day test positivity rate is the highest the state has e seen to-date, at 15.6%. This implies wide community spread and potentially many more undiagnosed cases within the community. Data continues to confirm the benefits of non-pharmaceutical interventions. A recent international study published in the Lancet found that public events bans were associated with the highest reduction in the effective reproduction number Rt. Ms. Morgan spoke to the Georgia Tech: COVID-19 Event Risk Assessment Planning Tool: https://covid19risk.biosci.gatech.edu/). This tool shows the risk level of attending an event, given the event size and location. The risk level is the estimated chance (0-100%) that at least 1 COVID-19 positive individual will be present at an event, given the size of the event. For Specimens collected October 15th to November 18, 2020, it has taken approximately two days after specimen collection for results to be reported. Differences across different counties and laboratories are

displayed in the table above. Ms. Morgan spoke to results from the county criteria tracker for the previous week comparatively to the current slide as of November 16, 2020. This data includes prison cases. Ms. Morgan noted this data can be adjusted to exclude prisons upon request. A preliminary analysis was done, and results did change for five counties, but not significant enough to bring them out of an elevated transmission status. The slide for November 16, 2020 shows an increase in counties being flagged for elevated disease transmission. All counties are being flagged for high case rates and high-test positivity rates. Esmeralda County is flagged for having insufficient testing. Lincoln County is flagged for meeting all three criteria this week. All but four counties are flagged for case rate. This shows a very widespread of disease across the state.

Julia Peek, Department of Public and Behavioral Health (DPBH), provided an update on contact tracing and case investigation. As of yesterday, Nevada has identified a total of 30,465 of our cases through traditional case investigation and contact tracing efforts, which remains at 24.3% of total cases reported to date. DPBH remains at around a quarter of the cases be directly linked to another known case. Ms. Peek noted the Task Force should not expect to see this fluctuate much. This means that around 75% of the cases are linked to general community spread. Since mid-June, surge staffing has been used to reach out to close contacts and communicate quarantine requirements to them and check in with them daily throughout their quarantine. This is often done through text messaging. Since starting, there have been a total of 197,172 calls made to date by this surge staffing. Related to the COVID Trace app, there has been a total of 95,743 downloads as of last night. Since implementation, there has been 36 cases that had the app downloaded at the time of their diagnosis. There has been a total of 31 exposure notifications sent out via the app. Ms. Peek took time today to note the importance that all residents adhere to the requirements of isolation for those positive cases in our state and for quarantine for those close contacts of cases. By not following those requirements, you are putting those around you at work or in the community at risk of infection. Also, today Dr. Ihsan Azzam, Nevada's Chief Medical Officer, has released a technical bulletin reiterating that the Center for Disease Control (CDC) and Nevada no longer support the test-based strategy for the ending of self-isolation of cases. According to CDC, in most cases the test-based strategy is no longer the method of choice for the discontinuation of home isolation, so it should not be used as a requirement for recovered individuals to return to the workplace, unless it has been found by a health care provider to be clinically necessary. DPBH is hearing statewide that employers are requiring negative test results prior to returning to work and this is not necessary and causes an unnecessary burden on our testing resources. That technical bulletin will be available on the DPBH website. Wesley Harper noted the Nevada League of Cities has been communicating with the cities about encouraging the use of the app. There has been some hesitancy or concerns about privacy and perhaps having cities being responsible for Health Insurance Portability and Accountability Act (HIPAA) violations. Ms. Peek noted on the Nevada Health Response website there is a discussion of privacy. Through the app DPBH collects nothing. DPBH does not collect data regarding if the person is a Nevada resident, if they have been identified as a possible exposure, or close contact. It is completely confidential. The only thing that is exchanged between the devices is the Bluetooth tokens. DPBH cannot track those. The way cases are identified is during the disease investigation process and asking the individual if the app has been downloaded. If the individual has the app, DBPH provides a code. DPBH is looking at options to do that outside of disease investigation process, but that is the only time that somebody from the health department will be talking about the app and/or have any information on if a case or contact had the app. DBPH does not receive any information on those who have been notified they have had an exposure. So, if the individual gets the exposure notification, it tells them where they can go to get tested and about the need for quarantining for that period. That is between the individual and their phone. Director Harper confirmed all this information is on the website for the information. Chair Cage noted in Ms. Morgan's update, 13 of 17 counties are flagged on the elevated disease transmission list and that is indicating an increased community spread. Every trend is climbing in the state of Nevada. This is the reason the Task Force is established so that when counties across the state are on that list for two-weeks in a row, have a conversation to identify what those issues are at the county level specifically. As Ms. Morgan pointed out, the populations in the prisons in the counties are a different f type of community spread and there are considerations that are observed similar to skilled nursing facilities. Chair Cage noted now is the time to start the conversation and see what the

mitigation and enforcement measures are the local communities want to put in place and what resources and support can be provided from the state. Chair Cage noted there have been ongoing conversations regarding the difficulty with the lab turnaround times. It is known that many of the federal resources or allocated resources to date are coming to an end at the end of next month. The Governor did a press conference about a week and a half ago stating in two-weeks he would make a decision on where we were. Today, we need to have that discussion and see how we can help with the expectation that the Governor is going to be making a decision next week that would be a statewide decision for the mitigation. Chair Cage requested the counties focus on presenting the changes to the Self-Assessment and Action plans, if those changes were implemented, and any state needs.

a. Carson City Self-Assessment and Action Plan (Presented 9th)

Nancy Paulson, Carson City Manager, presented on the Self-Assessment and Action plan submitted by Carson City. Ms. Paulson noted Carson City has attached a "Special Event Under 250 People" checklist to the Self-Assessment and Action plan. This checklist will be required for events to assist event sponsors in drafting an event specific operational plan to ensure a safe and successful event. In addition, the City has developed an event gathering decision matrix that will provide a guide using various parameters such as positivity rates and hospital capacity to determine when large gatherings should be allowed and at what capacity. Regarding enforcement, Carson City has established a COVID Compliance Task Force. The first meeting was held on November 13, 2020 and will continue to meet weekly to discuss efforts to further engage businesses in compliance efforts. The City has a meeting scheduled with OSHA staff to further discuss training and the City's compliance plan. Carson City is in the process of hiring a compliance coordinator to facilitate the City's compliance inspections. The plan is to increase compliance activity by increasing efforts to inspect businesses that the city is seeing to be out of compliance based on contact tracing information, prior history, and working in consultation with OSHA and B&I. Complaints will continue to be received through the COVID hotline. Carson City had a compliance rate of 96% from November 4th through November 17th and the second observation resulted in 100% compliance. This week, Carson City, did a press release related to the holidays and family gatherings which focused on actions that should be taken to prevent the spread of COVID. This information went out through social media. A flyer will be included in the City's weekly utility bills and to the school families working through the Carson City School District. Carson City will also be producing weekly videos featuring members of Carson City leadership asking the community to follow public health guidance. Carson City's number of active cases, as of yesterday, were 615. Of those, 505 are inmates at the Warm Springs Correctional Center. Due to the large number of cases at the correctional center, the city is requesting that the Department of Corrections establish a field hospital in an effort to reduce the impact on overall operations at Carson Tahoe Hospital (CTH). Carson City is also working with the state to try and get the prison numbers removed from the community case statistics. Ms. Paulson noted furloughs are set to start within the State in January and that would include NSHE employees. Carson City is requesting that the state waive that requirement for the NSHE staff that is working on the COVID-19 response as they are crucial to Carson City's operations. Chair Cage noted the Task Force has received three requests dealing with the extension of the Nevada National Guard beyond the middle of December, expanding the CRF dollars, and addressing furloughs. The Task Force will continue to follow up on these requests.. Chair Cage requested Ms. Morgan to continue to work with him in regard to the prison numbers. Ms. Morgan confirmed that none of the counties were impacted enough at this point to actually remove them from having elevated transmission with the removal of the prison data Ms. Morgan also note the data would still be counting those cases in our total number for counties, they would not go toward that specific criteria for community transmission. Chief Fogerson noted that CTH is on the verge of needing additional PPE and DEM has reached out to the Carson City Emergency Manager to see what the status is and what support they may need. Director Reynolds noted he is impressed with the level of activity that has gone on with the communities. The County has taken a hard look at their communities and what they feel is most effective to get the message across. Communities have learned over the last several months it is not one thing. It is a lot of actions that take place within the community. It is action by everyone and that is the message that

all need to buy into, an overall action plan to be able to stem the tide of this, and their needs to be a mission and a message that goes through and a purpose in the community. This needs to be done because it is impacting our health care system, will have a significant cost to the community, and to our health care networks within our state. Chair Cage concurred. Chair Cage asked Ms. Paulson if Carson City had any recommendations for the state's consideration. Manager Paulson noted she does not. No changes to the plan from last week.

b. Clark County Self-Assessment and Action Plan (Presented 3rd)

Chief Billy Samuels, Clark County, provided an overview of the Self-Assessment and Action plan submitted by Clark County. Chief Samuels noted the main difference Clark County this week is the setup of the communitybased collection site at Texas Station. This is in one of the top ten zip codes for higher elevations in Clark County. With the tests being in the higher elevated zip code, Clark County expects to receive higher positivity rates and that is what is being seen. Hopefully, this can assist in stopping the spready by letting people be informed that they have tested positive. Hospital capacity is increasing. Hospitals are still stable between ICU beds, licensed beds, and staffed beds. Medications and equipment are stable as well. The hospitals do revert to the same thing about staffing as well. Chief Samuels asked to keep working on the BattleBorn Corp and any other avenues to make sure there is staffing relief for workers in the hospitals. Regarding business license and enforcement, Clark County is working to continue to follow the recommendations from Southern Nevada Health District (SNHD). The efforts that the counties were focused on for business licensing is through country clubs, banquet halls, and sports. That is where some of the issues are taking place. Clark County is working to address the issue. Misty Robinson, SNHD, noted as of today, Clark County has reached a milestone by surpassing 100,000 total cases. Regarding the safe gatherings plan, currently the 7-day average of COVID positivity rate is greater than 8% and the 7-day average of new cases is greater than 750. These two parameters are approaching, or exceeding surveillance capacity based on the criteria outlined in the SNHD Evaluation Large Gathering Plans Guidance as well as what is enumerated in Chief Samuels report. Therefore, SNHD is not recommending that large gathering plans be approved at this time. Although gatherings of 250 or less will not be submitting plans for review, SNHD recommends limiting of gatherings to 50 or less and it looks like that will be the case for the next couple weeks. Chair Cage asked if there are any recommendations from Clark County for the Governor's consideration for mitigation measures. Chief Samuels believes with the health district's recommendation for gatherings no greater than 50 will help solidify some of the things coming forward. Clark County does not have any recommendations to send to the Governor for consideration. Dr. Lake asked if SNHD has the percentage of compliance with the people that test positive, perhaps the asymptomatic people who test positive related to the quarantine or self-isolation and is there any kind of enforcement effort on those people to ensure that they self-isolate. Chief Samuels noted he does not believe they have the capability to track people that way. Ms. Robinson noted they do not have enough staff that can monitor every one of those cases. SNHD is doing the regular case investigations and going through the contact tracing processes. Disease investigators are trying to identify those folks and where they have been and if they are symptomatic or asymptomatic. Chief Samuels asked if there is a platform that does that. Dr. Lake noted he is not sure. We discuss enforcement on the business side but was wondering if anybody was trying to make any kind of enforcement on the quarantine or isolation side which seems to be possibly part of our root problem. No changes to the plan from last week.

c. Elko County Self-Assessment and Action Plan (Presented 7th)

Amanda Osborne, Elko County, provided an overview of the Self-Assessment and Action plan submitted by Elko County. Ms. Osborne noted Elko County has continued to work on the testing piece. Elko County is still working to set up instrumentation to be able to support the surrounding counties, but for now that is a work in progress. Staffing will continue to be a challenge. Elko County is also working with congregate facilities, including both the jail and the skilled nursing facility, to take advantage of the Quest program. Hopefully, that will be complete the first week in December 2020. Elko County received 10,000 BinaxNOW test kits and will start utilizing them on Saturday. Elko County has partnered with Great Basin College (GBC) to support a "Why I Wear a Mask"

campaign. GBC is leading that project and are working with local media outlets. In enforcement, Elko County has reached out to Director Reynold's team to better collaborate at a local level and support efforts as well as follow up on complaints and/or referrals being received by OSHA. Elko county does have a call scheduled tomorrow with community team leaders. Elko County is aware of a couple of establishments here in Elko that have had some concerns and/or problems with enforcement. There will be some meetings with those establishments in the near future. Elko County is working on increased communication to the local businesses on the importance of the directives and want to make sure that they understand there are resources available such as PPE and cleaning supplies if that is part of the issue. Elko County's hospital capacity is being stressed and some of the facilities that we transfer out to are feeling the same stress. Elko County does have the ability to expand within our facility, but it would take the staff to do that. Chair Cage noted Elko County has made progress regarding the testing turnaround and asked for any recommendations for the state to provide to the Governor for consideration regarding mitigation measures. Ms. Osborne noted Elko County has discussed gathering sizes. It would probably be helpful to reduce the number of folks who can gather together; however, Ms. Osbornes concern with that is Elko County is seeing most of the community spread from the family gatherings that happen in a private home. Mr. Delmo Andreozzi, Elko County, noted there are a lot of different things happening around within the county. The overarching goal is not very clear. Mr. Andreozzi's goal is to make sure Elko County does not overwhelm the hospital capacity. There are a lot of people that do not understand what is in it for them. If the county can rally behind what the purpose is of what the county and state are trying to do and what the goal is, this could have a huge impact on compliance. Chair Cage noted there have been discussions about th possibility of doing a round table to help share the messaging. Chair Cage noted he is still willing to do this from his end. Chief Fogerson noted when going through the first spike and planning for everything to come in slowing the spread to allow our health care system infrastructure to be able to meet the goal, he believes it was defined what we trying to do, and getting the message out that it is not that we are going to eradicate the disease, but what are we really trying to do and how are we trying to do it. It is a very valid point. Chair Cage noted going back to the Road to Recovery Plan and identifying some of those items, gives us a good starting point. Chair Cage noted they will continue to work on the testing equipment issue at hand. No changes to the plan from last week.

d. Lincoln County Self-Assessment and Action Plan (Presented 6th)

No representative available to present. Plan was approved at the previous Task Force meeting. No changes.

e. Washoe County Self-Assessment and Action Plan (Presented 2nd)

Kevin Dick, Washoe County, provided an overview of the Self-Assessment and Action plan submitted by Washoe County. Mr. Dick noted Washoe County has an alarming number of cases and levels of disease transmission occurring. Washoe County is continuing to see numbers increasing. Washoe County had a record 610 new cases that were reported yesterday. Washoe County's positivity rate has increased since Monday of this week and is now at 17.8%. The 7-day moving average is at 409 new cases per day. Hospitalizations have continued to increase in Washoe county. As of the last report from the NHA, Washoe County is at 234 confirmed cases and 50 suspected cases. Hospitals are feeling the strain at this point and hospital administrators are becoming quite concerned about what they anticipate coming their way in terms of additional cases in the future based on the high case rates that are in Washoe county and across Nevada.. On November 18, 2020, Ms. Morgan distributed the lancet paper that she discussed in her presentation. It is quite significant in that it is a peer-reviewed assessment of mitigation measures that were taken in 131 countries during the first six months of the year and looking at what the impact of those measures were on effective transmission rates. Washoe County understands the need to get transmission rates down below one in order to see a reduction in r numbers to get COVID under control. The study found that the single measures that had the greatest impact in reducing the transmission rate was to limit public and private gatherings to ten people or less. The study also looked at multiple mitigation measures and the impacts that would come from those. As other items are added on to the

limitation of gatherings, the transmission rate can be reduced further. Need to move toward limiting our gathering sizes further to no more than ten. As an ask of the state, with the concerns that Washoe County has from our health care system Mr. Dick requested renewed efforts to work on recruiting medical personnel through the BattleBorn Corps as the hospitals are really looking for assistance with staffing. This is necessary for them to continue their operations and to meet the demand that is being placed on them.

Eric Brown, Washoe County, noted both the City of Sparks and City of Reno have significantly stepped up enforcement efforts. Due to the elections that took place, Manager Brown had the opportunity to visit 20 poling locations around the county and asked their points of view on COVID compliance to include questions on wearing a mask, social distancing, and what is going on at their businesses. Mr. Brown does not believe this is an enforcement issue. The behaviors being seen or that people are disclosing, are bad behaviors or COVID fatigue. A school was closed, and a parent disclosed they had a Halloween party with over 150 people and there was another party in Verdi with over 500. Those are the behaviors that go beyond enforcement efforts in the bars, restaurants, and retail establishments. The evidence suggests this is where the problem is. Washoe County is trying to ramp up public outreach campaigns and has expanded outreach to all the major broadcast affiliates in Northern Nevada. Washoe County has received a good response in the Latino community. Washoe County is significantly increasing the media weight against the campaigns. Mr. Brown noted concern as Washoe County has still have not been reimbursed as an Incident Management Team (IMT) for the FEMA expenses that have been incurred as an IMT. Washoe County is coming up on the end of the year, if there is no resolution for this, it will force Washoe County to make some hard decisions about whether to use CRF for those expenses. Neil Krutz, Sparks City Manager, echoed what Manager Brown said. Sparks has stepped up inspections and enforcements in Sparks. In the coming weeks Sparks anticipates seeing those numbers go up even more through a combination of internal staff reassignments and bringing some contract resources. Sparks looks forward to being more embedded in the community on a recurring basis. With last week's inspections, Sparks did have four violators. No trend in those violations and will be mindful of Director Reynolds guidance on the big box retailers and the grocery stores and paying attention to the capacity.

Rebecca Venis, Director of Neighborhood Services of Reno, noted they have seen that the rate of the increase has slowed as compared to the previous two weeks in Washoe County and believes this speaks to the increased efforts that have occurred between the three entities in terms of enforcement. The City of Reno has significantly increased enforcement efforts in the past two weeks. Sparks has completed almost 500 inspections with a 97% compliance rate. This is a 300% increase in inspections and represents 4% of the total storefront and in-person customer-based businesses that are in the city. City of Reno is working in partnership with Renown, the Washoe County School District, and Nevada National Guard for testing. City of Reno will be hosting a mobile test site this coming Sunday at Wooster High School. Ms. Venis spoke to continued support of the regional campaigns that Manager Brown referenced and has been working closely with some of our Hispanic consultants and a group of students at the Reynolds School of Journalism at UNR. They conducted a survey on campus to students to ask how they felt about the disease and what kind of actions they were taking. About a third of those students indicated they have no concerns about contracting the disease, and they are not afraid of transmitting it to family members because they are not living at home. Work is being done with that group of students to create campaigns on alternate media platforms to reach out to students and to try to convince them not to be going to these activities and events. City of Reno is committed to working with our regional partners, the health district, and the state Task Force to do what's necessary to keep both the community safe but also try to manage a balance to keep our businesses open as well. Mr. Dick noted the Washoe County School District posted the agenda for the upcoming meeting on Tuesday and they are recommending the school district go to full distance learning after the Thanksgiving break through the Martin Luther King holiday. Chief Cage clarified that the 10person gathering size is a recommendation for the Governor's consideration and not for the Task Force. Mr. Dick confirmed that was correct. Dr. Lake noted as the Task Force starts looking at possible mitigation measures and following the last set of closures and controls that were put in place, were any unintended consequences observed in terms of overall population mental health. Manager Brown noted that there were impacts from

the closures. Manager Krutz noted, in speaking with the police chief in Sparks, starting in March 2020, they saw an increase in domestic violence and the size of the homeless population. Director Reynolds reiterated that indoor gatherings are still an issue and emphasized looking at the big box stores and grocery stores to ensure they stay within capacity limits, that will help. Dr. Southard noted they are working with the Joint Information Center (JIC) with the State Emergency Operations Center (SEOC) to push out additional messaging requesting people to sign up to volunteer and there is a robust registry. DPBH will follow up on all requests for volunteers for hospitals and healthcare facilities. No changes to the plan from last week.

f. Lyon County Self-Assessment and Action Plan (Presented 8th)

Jeff Page, Lyon County, provided an overview of the Self-Assessment and Action plan submitted by Lyon County. Mr. Page noted Lyon County is focusing on messaging. There is a segment of population and politicians that keep stating these directives are violating their personal rights. Lyon County is working on the messaging in an effort to reduce the threat to hospitals and healthcare system. The messaging focus on "if you will work with us for the next three weeks and do these things, we may have a better chance to get the public to follow suit." We are working within Lyon county and with the quad county on messaging. Lyon County has contracted with a company to do public service announcements (PSAs), to put out on social media with each of our individual commissioners, the mayors, asking people to follow suit to do what needs to be done. Mr. Page believes this is the solution to the issue. This is a public health issue. Lyon County should focus on getting that message out. Chair Cage asked Mr. Page if Lyon County had any recommendations to present to the Governor regarding mitigation efforts. Mr. Page recommended clear and consistent messaging from the Governor; this would be extremely helpful. Believes the state and every county and city in the state of Nevada has done a phenomenal job of working together to address the practices and procedures. No changes to the plan from last week.

g. Nye County Self-Assessment and Action Plan (Presented 4th)

Scott Lewis, Nye County, provided an overview of the Self-Assessment and Action plan submitted by Nye County. Mr. Lewis noted the majority of the information they have provided in their report is similar to previous reports. Nye County has taken some additional steps. Nye County has used the same format that SNHD used and incorporated it into the report. Nye County is reviewing almost all proposed events within the county. The county has closed county government to public access and remote working from home. Nye County recognizes the biggest issue in the county is the behavioral aspect. Mr. Lewis inquired if there is a behavioral messaging that can come from state behavioral health that could assist in getting those PSAs that will drive home how important that is. Nye County has a lot of suicide issues per day in general and there is starting to be a significant uptick. It is down to the individuals now and their behavior and how that is driving our overall lack of success in this pandemic. Regarding hospitalization, Nye County is strained. Tracing and investigations are strained. Nye County is investigating over 1,000 cases in Pahrump and almost 1,100 in Nye County. There were another 20 plus cases that have come in since the beginning of this call, including another death. PSAs are being prepared and are trying to hit the targeted audiences especially with the upcoming holidays. Chair Cage noted there are a number of messaging and campaigns associated with mental health and holidays that the state has available. . Chair Cage requested Chief Fogerson and Director Whitley, DHHS, to follow up with Mr. Lewis and assist with the issues mentioned above. Chief Fogerson noted he will follow up. No changes to the plan from last week.

h. Humboldt County Self-Assessment and Action Plan (Presented 5th)

Nicole Maher, Humboldt County, provide an overview of the Self-Assessment and Action plan submitted by Humboldt County. Ms. Maher noted Humboldt County has had 80 new cases since the beginning of November 2020, which puts them at 4.4 cases per day. That compares to 1.6 cases per day during the previous peak. Currently, Humboldt County, has 56 active cases. In the Fort McDermott reservation, which reports separately, they are currently at 136 cases and 20 active cases. Currently, five Humboldt county residents are hospitalized

locally. No ventilators are in use and no patients are in ICU. PPE remains in a good status. Early in Humboldt's fight against COVID-19, the Humboldt County Health Board established the Humboldt county Business Educator Program. In April and May 2020, this group of county and city officials worked with local businesses and organizations. This past Monday, Humboldt county reinstated that program. Humboldt Counties goal is to make sure that businesses and organizations are contributing to the solution and not just the problem. Humboldt County sends out a letter to all businesses in the county outlining the expectations for business and organizational virus mitigation measures. Humboldt County is going to include a media campaign that is aimed at reminding retailers and consumers to work toward a COVID free Christmas. Humboldt County has an email address that will allow citizens to ask questions, address concerns, and make recommendations for mitigation measures. Humboldt County will provide notice to individual businesses and organizations regarding complaints and request a written plan for solution and then the county will follow up with individual businesses and organizations to ensure accepted solutions are in progress. The Humboldt County Health Board is in the process of launching a public relations campaign that will focus on the idea of gifting health and protection to others. Humboldt County's Business Educator Program officials will make observations. The Business Educator Program will, at a minimum, observe ten businesses each week and work up to 20 each week. to the goal is to ensure that those businesses are following required protocols. Last Tuesday, Humboldt County started sending samples to Quest for processing. Humboldt County has been promised that tests will now be turned around in 48 to 72 hours. Humboldt County is working on a draft vaccination plan, with the goal of moving forward with tier one vaccinations in Humboldt county. Commissioner Ken Tipton, Humboldt County, noted he does not have anything additional to add. Chair Cage asked if Humboldt County has any recommendations for the Governor regarding additional mitigation efforts. Ms. Maher noted they are deeply concerned about gathering limits. Chair Cage asked Commissioner Tipton for recommendations for the state to take to the Governor. Commission Tipton noted he does not have anything further to add. No changes to the plan from last week.

i. Douglas County Self-Assessment and Action Plan (Presented 1st)

Patrick Cates, Douglas County, provided an overview of the Self-Assessment and Action plan submitted by Douglas County. Mr. Cates noted Douglas County is part of the Quad County Healthcare Coalition. CCHHS serves as our public health agency. As of Tuesday, Douglas County has 498 total cases, 32 active cases, and two deaths. For reference Douglas County has a population just shy of 50,000. As of Monday, Douglas County was at 307 tests per day and noted the county was lagging on tests in September and early October. Douglas County has done a lot of PSAs, mixed up some of the locations for testing and good results have been seen from this. As of Monday, the cases per 100,000 are at 447, test positivity rate was 13.4%. Douglas County has been doing a lot of robust information campaigns and has put out our own material in a variety of formats. Douglas County has amplified what our city health and human services and the state has been putting out. Douglas County has a very active social media presence, but the county is being challenged with a lot of compliance fatigue. Douglas County has some of the oldest demographics in the state and compliance among our citizens to state directives and CDC guidelines remains high. Most recently Douglas County put out a press release on Monday and spoke about the numbers and impacts on the health care system. People are recognizing the data and the Governor's press conference on the 10th and are taking that to heart despite some continued communication challenges. The county implemented a COVID 19 Preparedness Response Plan in May 2020. This plan is continuously being updated as state directives and CDC guidance changes. Douglas County is requiring masks in our facilities for employees as well as the public and are doing remote transactions as much as possible. All our in-person senior programs have, for the most part, been cancelled. Instead these facilities are doing deliveries and remote care for seniors. After the Governor's press conference on the 10th, Mr. Cates met with the managers in the county and elected officials and encouraged them to step up telecommuting opportunities. The Douglas County Sheriff's Office has recently changed their protocols as a result of these changing metrics. They are now requiring face coverings for police officers whenever they are interacting with the public and in the offices. Douglas County continues to work with the two Chambers of Commerce and the Business Council to engage with businesses. Douglas County has also implemented a small business grant program to help businesses not

only with PPE costs but working capital as well. Douglas County is experiencing challenges with enforcement. Douglas County is one of the few counties that does not have a business license entity. There are only two code enforcement officers for the entire county. The sheriff's office routinely responds to complaints and goes to businesses and engages in education on the protocols. One of the challenges has been Lake Tahoe. Douglas County has been partnering to do messaging at Lake Tahoe regarding tourists. The CCHHS hotline, has a process where people are calling in and if it looks like there are issues with compliance with the directives for businesses, they are referred to OSHA. Douglas County also gets health inspections services from CCHHS and they have some protocols as well for COVID when they go out on their inspections. Most major events within the county have been canceled. Douglas County currently has a couple of events planned which include holiday events for Gardnerville and Minden for early December. Those were planned to go forward with a lot of protocols in place. It is outdoors, and it is not expected there will be more than 250 individuals in attendance; however, considering where the metrics are going, Douglas County is reviewing this plan again.

Director Richard Whitley requested clarification on if the quad county covers environmental health for Douglas County. Nicki Aaker noted there is a contract with Carson City and Douglas County to provide environmental health services and restaurant inspections. There are protocols for these inspections. Chair Cage asked if they are recommending through this plan any increased mitigation measures in your community or are all of these in place now. Mr. Cates noted all are in place now, except for doubling public service announcements and not approving events going forward. Chair Cage asked for recommendations that the state can implement. Todd Carlini, East Fork Fire, noted they do not have any current recommendations. Director Whitley noted without local business licensing, where the findings are reported to and what is done after that point. Not aware of if there are any issues of compliance in that area. Ms. Aaker noted they have not received any large issues. When inspectors go in, they are requiring them to put masks on. They have very good compliance in the casinos also. Dr. Jeanne Freeman, CCHHS, noted early on in the COVID outbreak, there were some issues with a couple of different food establishments within Douglas County and investigations worked very closely with them related to the spread within their establishments and were able to collaborate. They were all very receptive to that feedback. Chair Cage noted there was a political rally that received a fine in Douglas County and would like to encourage, as local leaders, to understand how those sorts of events undercut any positive messaging on public health going forward. Chair Cage noted it looks like the majority of the plan is relying on messaging and that is challenging considering the elevated positivity rate and case rate. The rural communities have impact on hospital numbers in Washoe and Clark County. Transfers are also an issue for the local hospitals. There was a significant increase in hospitalizations in the quad counties that corresponded with an increase in number of cases in Washoe County. With statewide numbers going where they are, my recommendation would be to approve this plan with the understanding that without mitigation measures. Chair Cage noted he is going to have to recommend statewide mitigation measures in order to ensure that we can get the spread of these cases under control. Also, to ensure that our vulnerable populations are protected. Chair Cage made a motion to approve the plan with an update to the plan to include an increased focus on enforcement. Terry Reynolds seconded the motion. Chief Dave Fogerson abstained from the vote. Motion passed. Mr. Reynolds noted with all of the plans it needs to be ensured we are diligent in adhering to the capacity limitations that are set in the directives on the restaurants and retail areas because this is where compliance issues are being observed. Chair Cage made a motion to approve the plan as submitted by Douglas County with an update to include focus on enforcement in the future. Terry Reynolds provided a second. Mr. Reynolds also noted the importance of following occupancy limits for public buildings. Chief Dave Fogerson noted he would like to be excluded from this motion due to this being his previous place of employment. Motion passed unanimously.

7. Update on Safe Gatherings from Local Health Authorities

a. Carson City Health and Human Services

Update was provided in the Carson City Self-Assessment and Action Plan.

b. Southern Nevada Health District (SNHD)

Update was provided in the Clark County Self-Assessment and Action Plan.

c. Washoe County Health District

Update was provided in the Washoe County Self-Assessment and Action Plan.

8. Update on Lab Reporting and Contact Tracing Improvements

Chair Cage noted a small group began meeting a few weeks ago and the idea of the meeting was to get the ground truth on what the time difference was between the reported turnaround times that we have from Ms. Morgan, , and what we are hearing is the experienced turnaround time from our local partners. The group was looking to see what the challenges and solutions might be. The group looked at what the process is in the reporting system; what additional resources may be needed and what resources could be provided. The group worked with specific counties in order to provide resources to them for additional testing, as well as working on staffing for the laboratory licensure group within the DPBH to make sure staffing is not an issue, labs can be turned around quickly, and licenses can be moved through the process effectively. Chair Cage noted work from the group is still ongoing and is hopeful to be able to report out on this soon. Dagny Stapleton noted there has been a substantial amount of work done already to address this issue. It is really heartening to see the progress being made. Ms. Peek noted it has been a great opportunity and under Dr. Pandori's leadership, there may be future opportunities to make investments with the COVID dollars that will improve public health past this pandemic. Some of the efforts the NSPHL is doing include outreach to rural communities and building capacity within those communities. This will benefit the growth of the public health system ongoing. Ms. Peek acknowledged Elko county who has come to the table wanting solutions and is excited to see how this will improve public health in perpetuity. Dr. Mark Pandori thanked Northeastern Regional Hospital for working closely with the NSPHL and finding a solution to set up additional testing in that part of the state. It is not an easy thing to do to set up a new laboratory. People are trying to open and do whatever they can to solve this problem. Dr. Pandori noted he is deeply appreciative of the common efforts.

9. Overview of Task Force Report on Statewide COVID Response for 2020

This agenda item was moved to the next meeting.

10. Public Comment

Chair Cage opened the discussion for public comment in all venues. No public comment was provided.

11. Adjourn

Chair Cage called for a motion to adjourn the meeting. A motion to adjourn was presented by Chief David Fogerson and a second was provided by Dagny Stapleton. The motion passed unanimously. Meeting adjourned.